MFPRSI MUNICIPAL FIRE & POLICE RETIREMENT SYSTEM OF IOWA
7155 Lake Drive, Suite 201
West Des Moines, IA 50266
Phone: 515.254.9200
Toll Free: 888.254.9200
Fax: 515.254.9300
pensions@mfprsi.org
www.mfprsi.org

Authorized Leave Notice

Notification of An Active Member Absent from Work for Any Period of Time in which They Do Not Receive Full Pay.

Complete the appropriate section of the form below. This information will remain confidential in MFPRSI's records, support service credit calculations, and to verify less than normal earnable compensation.

Member's First Name _____ Member's Last Name _____ Last 5 Digits of SSN _____

City _____

Military Leave

Report only if the member will receive less than full pay during some portion of the leave period.

Last Day Worked: ____ / ____ / ____ (MM / DD / YYYY) **Date Returned to Work:** ____ / ____ / ____ (MM / DD / YYYY)

Branch of Service:

Has the city complied with Iowa Code 29A.28 regarding continuance of salary for 30 days? Yes ☐ No ☐

Other Leave Without Pay

Last Day Worked: ____ / ____ / ____ (MM / DD / YYYY) **Date Returned to Work:** ____ / ____ / ____ (MM / DD / YYYY)

Will earnable compensation be paid during any part of this leave? Yes ☐ No ☐

Reason for leave:

Name: _____ **Date:** _____
City Official completing form